

NEW CURRICULUM (REVISED) A.M. DOGLIOTTI COLLEGE OF MEDICINE UNIVERSITY OF LIBERIA MONROVIA 19 November 2010

PART 1 – "RULES AND REGULATIONS"









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1. BACKGROUND

It was President William V. S. Tubman who first envisioned a Medical School in Monrovia where to train Medical Doctors for Liberia, in particular, and for Africa at large. He obtained the assistance of the Italian Government, the Vatican and the A.M. Dogliotti Foundation that made his dream come true in 1968 when "Monrovia-Torino Medical School" (established in 1966) admitted the first group of first year students.

The College represented an example of a technical cooperative venture involving the Government of Liberia, the Holy See, the Dogliotti Foundation and the Italian Government.

It was then affiliated with the Faculty of Medicine and Surgery of the University of Turin in Italy.

In 1970, the College was merged with the University of Liberia as the seventh academic program, and the second professional school. It was then renamed "Achille Mario Dogliotti College of Medicine", after the late Italian philanthropist and founder of the Dogliotti Foundation in Italy.

A year later, the John F. Kennedy Memorial Hospital was inaugurated and became the teaching hospital of the A. M. Dogliotti College of Medicine. The first class of medical students entered the clinical program at the John F. Kennedy Memorial Hospital in July 1971.

In December 1973, the A. M. Dogliotti College of Medicine saw the graduation of the first set of medical students achieving their degree of Doctor of Medicine (MD).

In 1982, the College reached a milestone with the graduation of its first 100th medical doctors as 16 students graduated in that year.

The support of the Italian Government and the Dogliotti Foundation provided substantial and material support to the College between 1966 and the 1980s, when funding was scaled down (according to plan) before the inception of the 14-year civil war of Liberia which started in December 1989.

The Liberian civil war adversely affected every aspect of the A.M. Dogliotti College program to the point that the institution was closed in May 1990, to re-open two years later with the bare minimum training capacity.

After the re-opening, the World Health Organization (WHO) and the Roman Catholic Church of Liberia were the major supporting organizations of the College.

However, in 2007 during the official visit by President Ellen Johnson Sirleaf in Italy, an agreement was reached between the Liberian and Italian Governments, by which the Italian Government was to provide support in order to reinforce the Liberian health sector, and in particular the A.M. Dogliotti College of Medicine of the University of Liberia.

As a consequence, the Ministry of Foreign Affairs, through the Italian General Directorate of Development Cooperation (DGCS) nominated the Istituto Superiore di Sanità (ISS, National Health Institute of Italy) as the organization responsible for designing, implementing, and completing the requalification and strengthening of the Dogliotti College of Medicine.

In order to realize this project titled "Strengthening the training capacity of the A.M. Dogliotti College of Medicine, Monrovia, Liberia", ISS is supported by the specific skills and competence of the FSS - Fondazione per la Sicurezza in Sanità (Security in Health Foundation).

The overall objective of the project, officially started in April 2009, is to improve the health standards of the Liberian population through adequate training of its health officials, and in particular to improve and strengthen the capacity of the A.M. Dogliotti College of Medicine in order to train and produce competent and qualified doctors.

2. VISION

A technologically-driven, internationally acclaimed medical college that is research- and practice-oriented and dedicated to community development.

3. MISSION

The School's philosophy, upon which the entire academic program is based, is that the education of doctors entails a total commitment on the part of the school's, administration, the faculty, and the students.

The primary function of the "A.M. Dogliotti" College of Medicine is to provide medical training designed to:

- Ensure that students have opportunities to experience and become acquainted with new and emerging technologies, developments and practices in the medical profession;
- Prepare highly competent students with the intellectual, clinical and technical expertise necessary for the effective practice of medicine within Liberia and internationally;
- Provide students with the skills essential for expanding upon and improving existing health care delivery systems in Liberia;
- Promote in the student the desire to pursue a lifetime of growth in the medical profession, to better serve both the public and the profession and to promote the highest ideals and ethics of the medical profession;
- Encourage students to dedicate themselves to self-directed, life-long learning;
- Prepare graduates of the college to work in partnership with other professionals to improve quality of life and to provide holistic and comprehensive services that will deal with complex health problems confronting Liberia;
- Provide solutions to community and environmental health problems through outreach programs and resource mobilization;
- Generate new knowledge through research;
- Maintain a culture of health research that will seek deeper understanding of disease patterns, health policies and support services delivery in the health sector;
- Forge collaborations with universities and research institutions worldwide.

4. OBJECTIVES

The objectives of the A.M. Dogliotti College of Medicine are:

- To provide courses of instruction leading to degrees, diplomas, certificates and other University distinctions in medical and allied health professional studies;
- To provide special training courses to meet manpower needs of the nation;

- To conduct research in the field of medical and allied health sciences;
- To organize and conduct conferences, seminars, workshops, study groups, short courses and related activities;
- To recruit and retain adequate and highly qualified faculty and staff through the establishment of proactive and attractive faculty and staff development programs;
- To employ Information Communication Technology to support quality medical education;
- To create public awareness on the role of the College of Medicine in the development of Liberia.

4.1 Terminal Objectives of the curriculum

The curriculum of the A.M. Dogliotti College of Medicine is designed to equip students with knowledge of the scientific foundations of medicine, skills and competencies to enable them to deal confidently with the prevailing and emerging medical and health conditions at both national and international levels.

The cardinal objective of the curriculum is to ensure that upon graduation, the young medical doctor shall be found useful and relevant. Accordingly, throughout the training process emphasis shall be placed on acquisition of relevant knowledge, clinical skills, community orientation and research skills.

Therefore, at the end of the course of study, the graduate of A.M. Dogliotti College of Medicine should have the basic knowledge, clinical skills and competencies to:

- 1. Provide comprehensive individual health care, that is:
 - I. Take and adequately record a complete medical history;
 - II. Perform a complete and accurate physical examination;
 - III. Interpret the information from points (i) and (ii) and from supportive investigations;
- IV. Arrive at a provisional diagnosis with an understanding of the different diagnostic possibilities;
- V. Suggest a line of management;
- VI. Acquire an awareness of the effects and side-effects of the drugs he/she is prescribing in the treatment program;
- VII. Acquire an awareness of the effects and side effects of diagnostic or treatment modalities;
- VIII. Relate to the patient and his family in considerate, humane and ethical manner;
- IX. Deal with emergency situations and resuscitate the critically-ill patient.
- 2. Recognize his/her limitations and refer cases beyond his/her level of competence;
- 3. Acquire skills in "community diagnosis" and in the identification of community health problems. In addition, demonstrate competence to plan, organize, supervise and evaluate health care at the community level, i.e. maternal and child health, immunization, environmental health and health education;
- 4. Coordinate, supervise and evaluate the activities of other health workers and provide them with appropriate training;

- 5. Improve his/her level of competence through;
 - a) Continuous learning;
 - b) Self assessment;
 - c) Critical thinking;
- 6. Demonstrate competence in problem-solving when dealing with individual, family or community health problems, including early recognition of emerging diseases or disease precursors and identification of adequate solutions for these problems;
- 7. Collect and transmit pertinent information about health (health care needs, demands for service, distribution and seriousness of diseases and effectiveness of existing services) in order to facilitate health status monitoring;
- 8. Specifically, the graduate must demonstrate proficiency in the essential medical skills, as outlined below (4.2 to 4.6).

4.2 Communication with patients and their families, and with colleagues.

Essential communication skills are as follows:

- a) Building a good doctor-to-patient relationship;
- b) Effective communication (eliciting comprehensive medical history, clearly explaining diagnostic procedures);
- c) Provide basic patient education;
- d) Establish capacity to consent and gain informed consent for procedure/treatment.

4.3 Performance of Basic clinical procedures

The following are basic clinical procedures which a graduate from A.M. Dogliotti College is expected to perform with proficiency:

Venepuncture	Staining and examination of the eye
Peripheral intravenous cannulation	Perform injections
Peak flow measurement; spirometry	 Stabilize and properly refer an emergency patient
• 12-lead ECG	Be able to administer local anaesthesia
Pulse oximetry	 Vaginal speculum examination
• Blood-glucose measurement (finger prick)	 Microscopy of vaginal smear
Sterile technique and universal precautions	• PAP smear
 Perform incision and drainage of abscesses 	 Normal spontaneous vaginal delivery
 Routine wound care including removal of sutures/staples 	Routine STD testing
Manage gross external hemorrhage	 Perform routine urine testing
Basic burn care	 Perform routine stool testing
Insertion and removal Foley's catheter	 Measure and record vital signs
Application of temporary splint/cast	 Intubation and defibrillation (for BLS & ACLS)
Stabilize cervical spine fracture	Cardio-pulmonary resuscitation
Take throat/skin/wound swab	Repair of episiotomy
Removal cerumen from ear	 Neonatal resuscitation
Manage eipstaxis	 Assessment of fetal well-being

4.4 Perform the following procedures under supervision and be competent to do them as pre-registration intern:

Prescribe drugs required for most inpatients	• Report a case to the coroner or police		
Calculate drug doses and prepare drugs for routine administration	Measure central venous pressure		
Administer drugs by intradermal, subcutaneous and intramuscular injection	 Set up a blood transfusion 		
Administer drugs intravenously	Perform arterial puncture and femoral venepuncture		
 Record and report adverse drug reactions 	 Do chest aspiration and insertion of a chest drain 		
Insert and remove urinary cathete	Perform abdominal paracentesis		
Complete appropriate request forms for investigation	Perform a normal vaginal delivery		
Complete a death certificate form	 Suture a simple wound 		

4.5 Explain clearly to a patient the procedure for:

Procedure for VCT	• Colposcopy
 Procedure for tepid sponging 	 Insertion of a central venous pressure (CVP) line
Rectal administration of medicines	• Lumbar puncture
Exercise ECG	 Laparoscopy
Echocardiogram	Level 1 ultrasound
Angiogram	Prenatal information
Bronchoscopy	Postpartum information
• Endoscopy: upper and lower GI tract	Amniocentesis
Sigmoidoscopy	Para-cervical block

4.6 Attitudinal Objectives

The graduate of AMDCM should demonstrate attitudes which are essential to competent medical practice, including:

- Respect for patients, their families as well as for colleagues;
- Recognition of patients' rights, particularly with regard to confidentiality and informed consent;
- Awareness of the ethical behavior expected of doctors in dealing with patients;
- Sensitivity to relevant issues such as age, gender, disability and social class;
- The ability to work effectively as a member of a team, coupled with an awareness of personal limitations and the willingness to seek help when necessary;
- An approach to learning based on curiosity;
- An ability to empathize with patients' suffering and to treat them with kindness;
- The skill to explain the relevance and importance of the ability to cope with uncertainty;

- The ability to adapt to change;
- The ability to review their own medical practice with a view to improving it.

5. GOVERNANCE

The A. M. Dogliotti College of Medicine is a state-owned institution of higher learning. As a part of the University of Liberia Academic Programs, the College is headed by a Dean, appointed by the President of the University upon the recommendation of the Technical Advisory Board (TAB) of the College, subject to the approval of the Board of Trustees of the University, in accordance to the University of Liberia bye-laws.

All units in the College (academic, administrative or supportive) shall be under the jurisdiction of the Dean.

The Dean is assisted in the academic and administrative activities of the College by an Associate Dean who is also the Chief Medical Officer (CMO) of the JFK Medical Centre, the primary teaching hospital of the College. Other health facilities in the country that meet requisite accreditation requirements shall be incorporated by the College as teaching sites, and their heads shall coordinate with the Dean in the training of medical students. management Matters of discipline, training, resource and staff management/remuneration should be specified in the MOU between AMDCM on one hand and JFK (or other institutions) on the other hand.

There should be a Coordination Meeting among the Dean, the Associate Dean, the Preclinical and Clinical Coordinators, and the Heads of Facilities selected as training sites for MDs, quarterly or once a semester.

The following units shall be directly under the office of the Dean:

- A. Administration (including Records and Finance, which must necessarily prepare and administer a specific operational budget for the College)
- B. Educational Resource and Biomedical Equipment Management
- C. Discipline and Grievances shall serve as the channel for addressing both the grievance and discipline of students of the College
- D. Student Support and Mentorship appointed by the Dean shall be responsible for psycho-social and/or financial support, mentorship and counselling for students at the college.

The Dean is also assisted by the Pre-clinical and Clinical Coordinators who are appointed by the Dean to be responsible for the coordination of the Pre-clinical and Clinical Divisions of the College. These appointments should be done in consultation with the Academic Board. These academic administrators work through the chairpersons of departments in consultation with the Office of the Dean.

During his absence the Dean, will designate one of the Coordinators (Clinical or Preclinical) to act as the Dean.

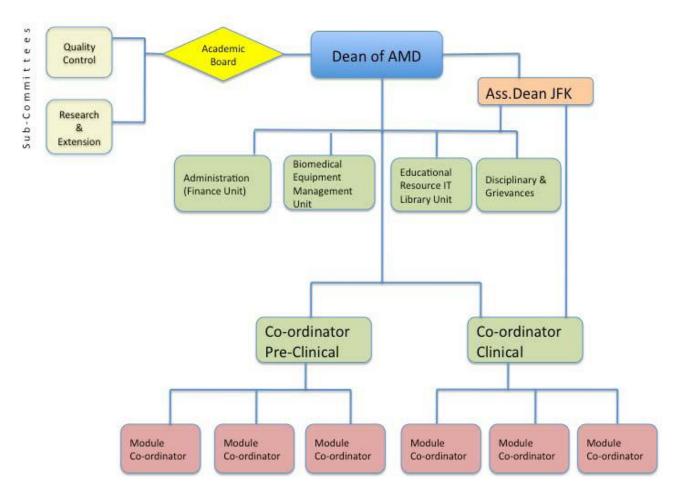
An Academic Board composed of Heads of Departments, full professors of the College and the Ass. Dean and the Coordinators, and chaired by the Dean, shall have final jurisdiction over academic matters at the institution. There shall be two subcommittees of the Academic Board:

A. Quality Control Committee, responsible for progressive curriculum update and review, monitoring of implementation, standardization of examinations and accreditation.

The work of this Committee will be dictated by the mandate of the Liberia Medical and Dental Council, which includes the setting of standards, evaluation and accreditation of training sites, resources and curricula for training of MDs.

B. Research and Extension Committee shall oversee all aspects of research including forging partnerships, planning and resource mobilization and allocation, protocol reviews, research ethics, implementation, monitoring and publication, involving students and staff at the college, including outreach activities. The work of this committee shall collaborate with other national and international

The work of this committee shall collaborate with other national and international institutions as necessary and relevant.



Administration of A.M. Dogliotti College: simplified organizational chart (to be revised and finalized).

6. ACADEMIC POLICIES

The A.M. Dogliotti is governed by a set of academic policies to guide students, faculty and administration.

6.1 Admission Requirements

6.1.1 Direct Entry

Any candidate who desires to enter the A.M. Dogliotti College of Medicine for the purpose of pursuing a degree of Doctor of Medicine (M.D.) is to meet the following conditions:

- a) must be a holder of a Bachelor of Science (BSc) Degree preferably in Biology, Chemistry, Physics, Mathematics or Biomedical Sciences, with a Cumulative Grade Point Average of 2.5 or above;
- b) must submit the following to the Office of Records and Registration at the College;
 - I. a formal letter of application;
 - II. an application form correctly and properly filled;
 - III. a (typed) autobiography of between 750 to 1000 words, including a personal statement of interest;
- IV. two recent passport-size photos
- V. three letters of recommendation, one of which must come from the Faculty attended;
- VI. an official transcript from the Faculty attended.
- c) must satisfactorily pass an entry test;
- d) must satisfactorily pass an interview conducted by a Panel of 8 members of A.M. Dogliotti Academic Staff, including the Dean of the College, Pre-clinical and Clinical Co-ordinators, CMO JFK, two members from the Pre-Clinical Division and one member from the Clinical Division and the registrar of UoL. The Dean and the two academic co-ordinators shall be statutory members of the interview panel.

Admission will be decided by the Admission Panel on the basis of a composite score made out of different aspects of qualification, entry test and final interview.

6.1.2 Transfer Candidates

Students from a recognized Medical School wishing to transfer to A.M. Dogliotti College must have good academic standing as evidenced in their official academic transcripts.

Transfer candidates must complete the three (3) years clinical program at A.M. Dogliotti College irrespective of the level they attained at the previous Medical School. The applicant must submit the following to the Office of Records and Registration at the College:

- A. a formal letter of application;
- B. an application form correctly and properly filled;

- C. a (typed) autobiography of between 750 to 1000 words, including a personal
- D. statement of interest;
- E. Two recent passport-size photos;
- F. two letters of recommendation, one of which must come from the Dean of them School attended;
- G. an official transcript from the School attended.

The Admission Panel shall determine acceptance of transfer candidates.

6.1.3 Readmissions

Student who formally withdrew and are seeking readmission shall submit a formal letter of application for readmission.

The student shall state before the admission panel reasons why he/she should be considered for readmission.

He/she shall assure the panel that the conditions and circumstances that occasioned the withdrawal have been addressed and will not interfere with the learning process at the College.

Students who dropped out unofficially should re-apply to the Medical School in order to be re-admitted.

The Admission Panel shall determine readmission.

6.1.4 Methods of Application for Admission

Application forms should be requested from and returned directly to:

Office of Admissions College of Medicine University of Liberia Monrovia Liberia, West Africa

Applicants are considered without regard to region, religion, sex and race, but preference is given to Liberians.

The Dean notifies successful applicants of their admission.

Accepted students are required to acknowledge offer of admission on or before registration.

7. REGULATIONS GOVERNING THE DEGREE OF DOCTOR OF MEDICINE

Courses will be provided leading to the degree of Doctor of Medicine (M.D).

The Degree may be awarded with honours or as pass.

In order to be admitted to the Degree of M.D. a candidate must fulfil the following requirements:

a) Satisfy the entrance requirements as prescribed in the Admissions Regulations of the College;

- b) Follow an approved course of study for a minimum of five (5) academic years at the College of Medicine in the case of direct entry students and a minimum of two and a half (2+1/2) academic years in the case of transfer candidates;
- c) Pass all the required examinations set out below;
- d) Pay all prescribed fees;
- e) Comply with such other regulations and requirements as may be prescribed.

8. EXAMINATIONS

8.1 General rules

Candidates must comply with the following general rules in relation to examinations at A.M. Dogliotti College:

- a) All candidates shall take examinations in all the prescribed courses, including interim assessments and examination held at the end of each semester;
- b) No candidates shall proceed to the following semester's courses until he/she has passed satisfactorily more than half of the examinations given for the period;
- c) In order to sit for the end of semester exams, candidates must have completed at least 75% of the total attendance requirements required for individual modules (including periods of practical course work in a qualified laboratory or teaching hospital as defined in this Curriculum).

In addition, he/she must have submitted and/or completed, to the satisfaction of the department(s) concerned, any course work or activity as outlined for individual courses.

No candidate shall be admitted to any examination in the College unless the Head of Department concerned has certified that he/she has completed by attendance and otherwise the requirements of the course;

- d) A candidate who was prevented by illness or other special circumstances acceptable to the Academic Board from sitting or completing the examination at the end of the first or second semester, may be permitted by the appropriate Head of Department to complete the whole or part of the examinations remaining during the re-sit session for that semester, or at any time deemed suitable by the Head of Department in accordance with the Academic Board;
- e) Any candidate who fails to appear for any scheduled examinations, without a legitimate reason acceptable to the Academic Board, shall be deemed to have failed the examination;
- f) Candidates who fail in half or less than half of the subjects taken will be referred in that subject(s) and be permitted to repeat the examination(s);
- g) Candidates who fail 1 or 2 subjects will be referred in that subject(s) and be permitted to repeat the examination(s);
- h) Candidates who fail in more than 2 subjects will be required to repeat the year;
- i) Candidates in their 3rd, 4th and 5th years who fail in any repeat examination will be required to repeat the respective year and satisfy the examiners in all examinations for that year;

- j) The Academic Board shall review exceptional instances. All decisions of the Academic Board of the College are in any case to be considered final;
- k) In each of the two Divisions of the college (Pre-clinical and Clinical), all students shall be subjected to the same testing and examination regulations and guidelines as follows:

A. Pre-Clinical Division

- 1. Continuous assessment (presentation, reports, seminars, written assignments etc. as specified for each course module) will account for 30% of the final grade;
- 2. Final examination will account for 70% of the final grade. All candidates shall take the examination in all the prescribed courses at the end of each semester.

B. Clinical Division

- 1. Continuous assessment (laboratory, seminars, participation in clinic, etc. as specified for each course module) will account for 30% of the final grade;
- 2. Final examination will account for 70% of the final grade. All candidates shall take the examination in all the prescribed courses at the end of each semester.

8.2 Submission of Results

At the end of the exam week the relevant Examination Committee (Clinical or Pre-Clinical) including any external examiners will review and validate results.

The examinations results should be submitted by the Head of Department to the Dean's Office through the Clinical and Pre-Clinical coordinators respectively no later than ten days after the examination.

The Academic Board shall meet soon after to ratify results. Once the evaluation process has taken place, the Dean shall forward the results to the Registrar's Office.

8.3 Notification of results

The Dean's Office will confidentially notify each candidate of his/her examination results.

8.4 Repeat Examinations

Students who fail to satisfy the examiners may be given an opportunity to do "Repeat Examination(s)" under the guidelines and regulations below stipulated:

- a) Repeat examinations for the first and second semester courses shall be given within one month after the official presentation of results;
- b) Candidates will be required to repeat the year and re-sit all the examinations in the prescribed courses if, in the regular examinations, they do not pass at least half of the prescribed examinations, or in the repeat examinations they do not pass all the subjects in which they were referred at the end of the semester examinations;
- c) Candidates who do not qualify for promotion from the third year to the fourth year will be required to repeat only the second semester of the third year;
- d) A candidate will be allowed to repeat a year only once during the pre-clinical years and only once during the clinical years. If a candidate has to repeat more than the stated number, he/she will be dropped from the College of Medicine. Extremely exceptional situations shall be discussed, evaluated and reviewed by the Academic Board.

8.5 Grading System

The following grading system shall be applied to all students at the College of Medicine.

A course grade, depending on the instructional staff of the course, may be determined by:

- a) Class participation;
- b) Seminar/Research presentation;
- c) Laboratory work;
- d) Clinical examination;
- e) Written examination (including MCQ, short answers and essays);
- f) Oral (viva voce);
- g) Others as might be appropriate.

The grading system is as follows:

Raw Score	Letter Grade	Quality Point	Quality of Work
97-100%	A+	4	Excellent
94-96%	A	4	
90-93%	A-	4	
87-89%	B+	3	Good
84-86%	В	3	
80-83%	В-	3	
77-79%	C+	2	Fair
74-76%	С	2	
70-73%	C-	2	
Below 70%	F	0	Failure

There is no "D" grade in the College of Medicine.

9. WITHDRAWALS

Students who receive a letter of admission and start classes may choose to withdraw from the College officially with impunity or may be advised to withdraw.

The following guidelines are provided to regularize the process:

- a) Student withdrawing from the College of Medicine while passing all his/her subjects may return after one year and continue with his/her former class;
- b) Student withdrawing while failing after one year may be required to repeat the semester provided he/she has not failed under category "b)" in section 3.4 (Repeat Examinations);
- c) Students withdrawing for more than two years in the Pre-clinical Division will have to start from the first year;
- d) Students withdrawing for more than three years will have to re-apply to the College of Medicine;
- e) Any situation not specifically covered under this section will have to be reviewed and decided by the Academic Board.

10. DISCIPLINARY MATTERS

10.1 Cheating

Any candidate who is found engaged in academic dishonesty as determined by the Academic Board, including cheating in an examination, shall be suspended for one academic year for the first offence, and expelled from the Medical College for the second offence.

10.2 Unwanted behavior

Any candidate who is found engaged in unwanted behavior at the Medical College as determined by the Academic Board shall receive the following punishments:

- a) for disorderly conducts, including gross disrespect and/or insubordination to the Medical College authority, the punishment shall be determined by the Academic Board;
- b) for disorderly conducts by a student against another student, including physical fights, the punishment shall be the following: for the first offence the responsible student shall be suspended from the Medical College for one academic year; for the second offence, the responsible student shall be expelled from the Medical College.

10.3 Expulsion

Students at the College of Medicine may be expelled on the grounds of poor academic performance under the following conditions:

- a) A student who fails more than 50% of the course in any semester shall be asked to repeat that semester in the following year. If, in the repeat, he/she fails to satisfactorily pass all courses, he/she shall be expelled;
- b) No student is permitted to repeat the class twice in any Division (Pre-clinical and Clinical). Students who fail to pass twice in a Division shall be expelled;
- c) Once expelled, the student can no longer be readmitted into the College;
- d) If the student feels unfairly treated, he/she might request the Dean to review the case. The Dean shall request the Academic Board to review the case. The report of the Academic Board on the case is to be regarded as final.

11. TEACHING AND TRAINING METHODOLOGIES

Teaching and learning activities will be based on the principles entailed in internationally recognized adult learning theories. Group learning and on-the-job training will be the main methods for delivering the curriculum. In addition, didactic sessions (lectures) will be arranged as they significantly enhance the conceptualization of facts and principles.

Activities that promote self-directed learning, like research projects, will also be used.

The following methods will be employed to deliver the knowledge-related outcomes:

- lectures
- small group teaching

- seminars
- journal clubs
- problem-based learning
- self directed learning
- student portfolio
- student selected modules (term paper)
- interactive lectures and student active breaks (bilateral exchange)
- reading
- audio visual materials (CD ROM, video tapes, etc)
- case studies
- individual research (internet, Cochrane review, local data sets, literature review, etc.)
- group discussion
- field work (observations, discussions with adolescents, etc.)

The intellectual and professional skills and attitudes will be taught and learnt through:

- on the job training (including diagnostic and therapeutic procedures)
- case presentations
- encounters with outpatients
- journal clubs
- clinical skills laboratory sessions
- role models
- group discussion
- exploration of personal attitudes
- focus groups
- exposure to views and values using real or 'simulated' patients, novels, biographies, videos, and websites based on individual patients' experiences
- role models in adolescent medicine
- promotion of attitudes such as 'openness' and 'introspection'
- field work (observations, discussions with adolescents, etc.)

The following methods are suitable for teaching skills:

- simulations (artificial models, standardized patients, role plays)
- supervised clinical practice
- videotaping clinical situations
- guidelines for good practice (including check lists and handouts)
- group discussions
- field work (observations, discussions with adolescents, etc.)
- thesis writing and presentations (evaluation).

12. ACADEMIC PROGRAMME

		Pre-clinical & clinical Curriculum						
Year	Sem.	PRE-CLINIC Units of teaching	Description	Credits	Total hours	Theory hours 20%	Practical Hours 40%	Personal study 40%
		Introduction to Medicine	Basic IT, Communication skills (writing), Ethics, History and		160	32	64	6
	1	(integrated) Embryology-Histology I	basic concepts of community medicine Embryology, Histology	8	160	20	64 40	6
1	1	Genetics and Cell-Biology	Medical Genetics, Cell-Biology	5	100	20	40	4
	1	Anatomy I	Human Anatomy, Radiology (imaging) introduction	12	240	48	96	
_	1	Physiology I	General Physiology	6 36	120	144	48	28
	2	Anatomy II	Human Anatomy	12	240	48	96	9
	2	Physiology II	Systemic Physiology	7	140	28	56	5
1	2	Embryology-Histology II Medical Biochemistry I	Embryology, Histology General Biochemistry	5	100 140	20	40	4
	-		Introduction to epidemiology, medical sociology, anthropology,					
	2	Community Medicine I	demography, communication skills	7	140	28	56	5
	1	Medical Biochemistry II	Metabolism and nutritional biochemistry	38	760	152	304 64	30-
	1	Pharmacology I	General Pharmacolgy	6	120	24	48	4
2			Neurosciences (neuro-anatomy, neuro-physiology, neuro-					
-	1	Neurosciences I	pharmacology, neuro-biochemistry) Neurosciences (neuro-anatomy, neuro-physiology, neuro-	11	220	44	88	8
	1	Neurosciences II	pharmacology, neuro-biochemistry)	11	220	44	88	8
				36	720	144	288	28
	2	Pharmacology II	Systemic Pharmacology	9	180	36	72	7.
	2	Bio-statistics	Bio-statistics, epidemiology methods and concepts Disease Control and Prevention; Environmental Health	8	160	32	64	0
2	2	Community Medicine II	(Echohealth/Sanitation/Ecology)	8	160	32	64	6-
	2	Laboratory medicine 1	General pathology, basic haematology & clinical chemistry, immunology, molecular biology & general medical microbiology	12	240	48	96	9
				37	740	148	296	290
_	7 - X					Theory		Persona
/ear	1. 1. L	CLINIC Units of teaching	Description (discipline)	Proposed credits	Total hours	hours 20%	Hours 60%	study 20%
	1	Laboratory medicine 2 a	Chemical pathology & haematology/blood transfusion Anatomical pathology & medical microbiology, parasitology &	9	180	36	108	3
	1	Laboratory medicine 2 b	virology	10	200	40	120	4
3			Communication skills, Introduction to history taken and patient					
	1	Clinical skills & nursing skill	phisical examination Epidemiological and research methods for community diagnosis,	11	220	44	132	4
	1	Community medicine III	rural posting	8	160	32	96 456	3
-	2	Medicine 1 a	Infectious diseases, pulmonology, gastronterology/Hepatology	12	240	48	144	4
1	38		Surgical pathology, surgical signs and symtoms, fluid electrolyte		2010.000			0.00
3	2	Surgery 1 a	balance/radiology	12	240	48	144	4
	2	Paediatrics 1 OBGYN1	Health Nutrition Family and Reproductive Health	6	120	24	72	2
		oborna	Turniny and heproductive fleater	38	760	152	456	15
	1	Medicine 1 b	Cardiology, nephrology, medical emergencies	9	1.577.575	36	108	3
4	1	Medicine 2a	Psychiatry 1, neurology, oncology,	11		44	132	4
ALCON .	1	Surgery 1b Paediatrics 2	General surgery, Surgical emergencies	10			108 120	
		r dediret i e e		39	780		468	150
4	2	Surgery 2a	Orthopaedics & traumatology, sports medicine, physiotherapy,	9		36	108	3
	2	Medicine 2b	Endocrinology, rheumatology and immunol. disorders	8		32	96	3
20	2	OBGYN2 Student elective		13		52	156 48	
_	-	orducite ciccure		34			408	
	1	Community medicine IV	Rural posting, PHC, occupational medicine,	13	260	52	156	5.
	1	Medicine 3	Dermatology and STI, psychiatry 2	9	180	36	108	3
5	1	Surgery 3	ORL, dentistry, ophthalmology, anaesthesia, urology, cardiothoracic & neurosurgery, paediatric surgery	11	220	44	132	4
	1	Ethics/Jurisprudence Forensic medicine	Jurisprudence, Forensic medicine,	3	60	12	36	1
		Management		36	720	144	432	14
		Management and	health planning and management and communication skills	6	120	24	72	2
	2	Communication Skills				-		-
	-		Toxicology and related disorders, therapeutics, chronic care &					
5	2	Medicine 4	gerontology	10		40	120	
5	-			10	200 180		120 108	4